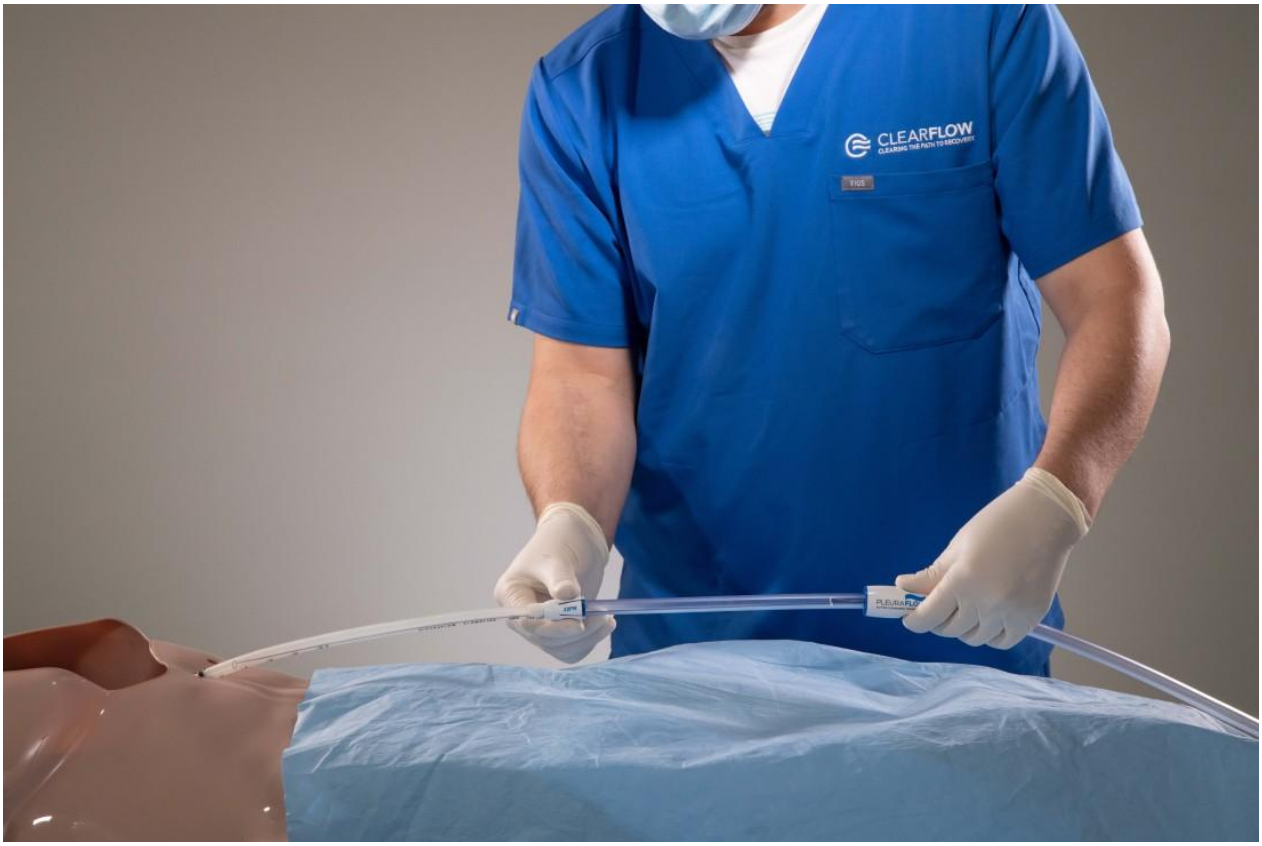
## Additional Magnetic Strength

During placement or actuation, if additional magnetic strength is needed, depress and hold the Shuttle Guide Magnet Strength Button.

## Guide Tube Path Not Straight

Ensure the Chest Tube and Guide Tube are as straight and parallel to the patient's body as possible when actuating. Ensure the proximal end of the guide tube is not elevated when attempting to actuate.

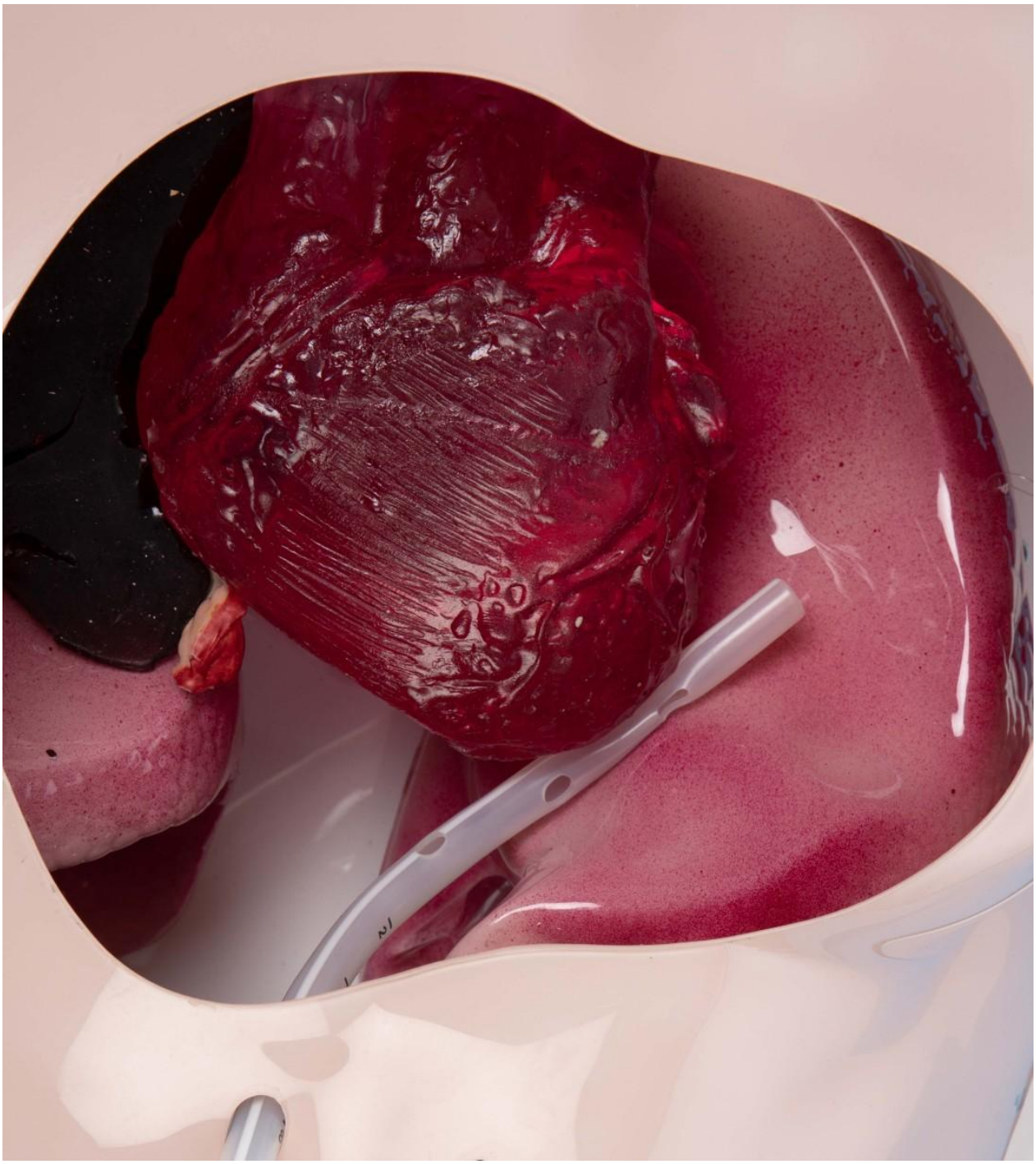



## Actuated Too Fast

The Clearance Wire and Loop may be encountering some resistance from clot which may require slower movement.

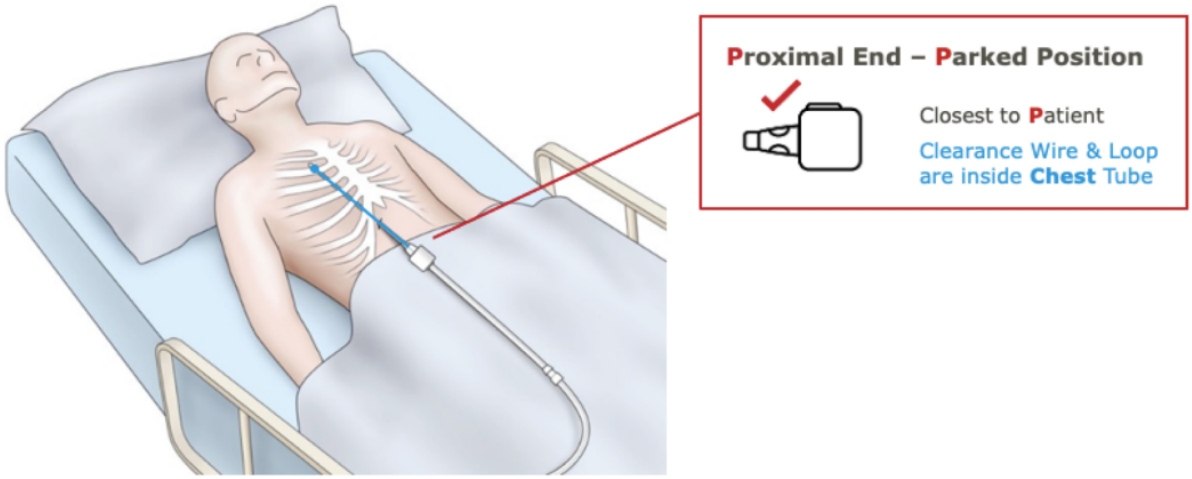
## Consider Patient Positioning

The Chest Tube may be compressed by swelling inside the chest cavity or encountering resistance due to patient positioning. Reattempt actuation when the patient has been repositioned (supine to semi-fowlers, semi-fowlers to supine, sitting to supine/semi-fowlers).



## Possible Clot Formation

During retraction, a clot may be occluding normal passage of the clearance wire and loop. If decoupling persists during retraction, slide the shuttle guide over the internal magnet to recouple and return to the parked position. Communicate the location of the decoupling to the ICU.

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If decoupling continues to occur, the PleuraFlow Clearance Apparatus may be disconnected from the PleuraFlow Chest Tube. The Chest Tube may then be connected to the drainage tubing and canister in the standard fashion.